| Fill in this information to identify your case: | | |
|---|---------------------------------|--------------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF INDIANA | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | |
|----|---|--|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Jeannetta First name Marie Middle name | | First name Middle name |
| | Bring your picture identification to your meeting with the trustee. | Johnson Last name and Suffix (Sr., Jr., II, III) | - | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-6673 | | |

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 2 of 49

Debtor 1 **Jeannetta Marie Johnson** Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EIN | EIN | | | |
| 5. | Where you live | 11248 Whistler Dr. | If Debtor 2 lives at a different address: | | | |
| | | Indianapolis, IN 46229 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Marion County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 3 of 49

Case number (if known)

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
|-----|---|---|---------------------------------|---|---|--|-----------------|--|
| | choosing to file under | ■ Ch | apter 7 | | | | | |
| | | ☐ Ch | apter 11 | | | | | |
| | | ☐ Ch | apter 12 | | | | | |
| | | ☐ Ch | apter 13 | | | | | |
| 8. | How you will pay the fee | _ | about how yo | ou may pay. Typi attorney is subm | with the clerk's office in your local court for rurself, you may pay with cash, cashier's checalf, your attorney may pay with a credit card o | k, or money | | |
| | | | | | | n, sign and attach the Application for Individu | ıals to Pay | |
| | | | • | | (Official Form 103A). Ved (You may request this option | only if you are filing for Chapter 7. By law, a | iudae may. | |
| | | l a | out is not req applies to yo | uired to, waive y ur family size and | our fee, and may do so only if yo d you are unable to pay the fee ir | ur income is less than 150% of the official por installments). If you choose this option, you ial Form 103B) and file it with your petition. | verty line that | |
| 9. | Have you filed for | ■ No. | | | | | | |
| | bankruptcy within the last 8 years? | ☐ Yes | i. | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | - | When | Case number, if known | | |
| | | | Debtor | - | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your residence? | ■ No. | Go to | line 12. | | | | |
| | residence: | ☐ Yes | . Has yo | our landlord obtai | ined an eviction judgment agains | you? | | |
| | | | | No. Go to line 1 | 2. | | | |
| | | | | Yes. Fill out Init | tial Statement About an Eviction . | ludgment Against You (Form 101A) and file it | as part of | |

Debtor 1 **Jeannetta Marie Johnson**

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 4 of 49

| Deb | Jeannetta Marie J | onnson | | | Case number (if known) |
|-----|---|-----------|---------------------------|---|---|
| Par | t 3: Report About Any Bu | ısinesses | You Owr | n as a Sole Propriet | or |
| | Are you a sole proprietor of any full- or part-time | ■ No. | | Part 4. | <u>v</u> |
| | business? | ☐ Yes. | Name | e and location of bus | iness |
| | A sole proprietorship is a | □ 1es. | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | e of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | oer, Street, City, Stat | e & ZIP Code |
| | it to this petition. | | Chec | k the appropriate box | x to describe your business: |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline | s. If you ir s, cash-f | ndicate that you are a low statement, and fe | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am ı | not filing under Chap | ter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | | | 11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11. |
| | | ☐ Yes. | | | 11, I am a small business debtor according to the definition in the Bankruptcy Code, and r Subchapter V of Chapter 11. |
| Par | t 4: Report if You Own or | Have Any | Hazardo | ous Property or Any | Property That Needs Immediate Attention |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and | ■ No. | What is | the hazard? | |
| | identifiable hazard to public health or safety? Or do you own any property that needs | | | diate attention is | |
| | immediate attention? | | needed, | why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | |
| | | | | | Number, Street, City, State & Zip Code |
| | | | | | |

Debtor 1 Jeannetta Marie Johnson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 6 of 49

| Deb | tor 1 Jeannetta Marie J | ohnson | | Case nu | ımber (if known) |
|------|--|-----------------------|---|---|--|
| Part | 6: Answer These Quest | ions for Re | porting Purposes | · · · · · · · · · · · · · · · · · · · | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily individual primarily for a p | consumer debts? Consumer debts are ersonal, family, or household purpose." | defined in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | |
| | | | Yes. Go to line 17. | | |
| | | 16b. | | business debts? Business debts are denvestment or through the operation of the | |
| | | | ☐ No. Go to line 16c. | | |
| | | | ☐ Yes. Go to line 17. | | |
| | | 16c. | | u owe that are not consumer debts or bus | siness debts |
| | | | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chap | oter 7. Go to line 18. | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | 7. Do you estimate that after any exempt available to distribute to unsecured credi | property is excluded and administrative expenses tors? |
| | administrative expenses | | ■ No | | |
| | are paid that funds will be available for | | ☐ Yes | | |
| | distribution to unsecured creditors? | | L 163 | | |
| 18 | How many Creditors do | | | □ 1,000-5,000 | □ 25,001-50,000 |
| | you estimate that you | ■ 1-49 □ 50-99 | | ☐ 1,000-5,000 ☐ 5001-10,000 | ☐ 50,001-100,000 |
| | owe? | ☐ 100-19 | 99 | ☐ 10,001-25,000 | ☐ More than100,000 |
| | | □ 200-99 | 99 | | |
| 19. | How much do you | = \$0 - \$5 | 50.000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | | 1 - \$100,000 | ☐ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion |
| | Jo Worth | | 001 - \$500,000 | \$50,000,001 - \$100 million | □ \$10,000,000,001 - \$50 billion |
| | | □ \$500,0 | 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| 20. | How much do you | □ \$0 - \$5 | 50,000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | | 01 - \$100,000 | \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion |
| | | | 001 - \$500,000 | □ \$50,000,001 - \$100 million □ \$100.000.001 - \$500 million | □ \$10,000,000,001 - \$50 billion |
| | | □ \$500,0 | 001 - \$1 million | \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| Part | 7: Sign Below | | | | |
| For | you | I have exa | amined this petition, and I | declare under penalty of perjury that the in | nformation provided is true and correct. |
| | | | | er 7, I am aware that I may proceed, if elig er relief available under each chapter, and | gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7. |
| | | | | id not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b | |
| | | I request | relief in accordance with th | ne chapter of title 11, United States Code, | specified in this petition. |
| | | bankrupto and 3571 | y case can result in fines ι | | ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | | netta Marie Johnson ta Marie Johnson | Signature of D | ehtor 2 |
| | | | of Debtor 1 | Signature 01 D | ODIOI Z |
| | | Executed | , | Executed on | |
| | | | MM / DD / YYYY | | MM / DD / YYYY |
| | | | | | |

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 7 of 49

| Debtor 1 _ | Jeannetta Marie Johnson | Case number (if known) | |
|------------|-------------------------|------------------------|--|
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Richard P. Batesky, Jr. | Date | March 2, 2020 |
|--|---------------|---------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Richard P. Batesky, Jr. | | |
| Printed name | | |
| Batesky Law Office | | |
| Firm name | | |
| 22 E. Washington St. #210 | | |
| Indianapolis, IN 46204 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 317-638-3471 | Email address | ssharondove@aol.com |
| 15368-49 IN | | |
| Bar number & State | | |

| Fill in this info | ormation to identify your case: | | | |
|--|--|----------|--|-----------|
| Debtor 1 | Jeannetta Marie Johnson | | | |
| Debtor 2 | First Name Middle Name Last Name | | | |
| (Spouse if, filing) | First Name Middle Name Last Name | | | |
| United States I | Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA | | | |
| Case number | | | | |
| (if known) | | | Check if this | |
| | | | amended filir | ng |
| 000 1 1 5 | | | | |
| | form 106Sum | | | |
| | of Your Assets and Liabilities and Certain Statistical Information te and accurate as possible. If two married people are filing together, both are equally responsible. | | 12/15 | ect |
| information. Fi | ill out all of your schedules first; then complete the information on this form. If you are filing amo | | | |
| your original fo | orms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | | | |
| Part 1: Sum | nmarize Your Assets | | | |
| | | | Your assets | |
| | | | Value of what | you own |
| Schedule 1a. Copy | e A/B: Property (Official Form 106A/B) line 55, Total real estate, from Schedule A/B | | \$ | 0.00 |
| | line 62, Total personal property, from Schedule A/B | | \$ | 13,800.00 |
| | | | | |
| 1c. Copy | line 63, Total of all property on Schedule A/B | | \$ | 13,800.00 |
| Part 2: Sum | nmarize Your Liabilities | | | |
| | | | Your liabilitie Amount you o | |
| | e D: Creditors Who Have Claims Secured by Property (Official Form 106D) the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | D | \$ | 7,000.00 |
| | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | | \$ | 0.00 |
| 3b. Сору | the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | | \$ | 76,389.36 |
| | | | | |
| | Your total liabilit | ties \$_ | 8 | 3,389.36 |
| | | | | |
| Part 3: Sum | nmarize Your Income and Expenses | | | |
| | e I: Your Income (Official Form 106I) | | \$ | 3,943.71 |
| .,, | ur combined monthly income from line 12 of Schedule I | | Ψ | -,- |
| | e J: Your Expenses (Official Form 106J) ur monthly expenses from line 22c of Schedule J | | \$ | 3,901.95 |
| Part 4: Ans | swer These Questions for Administrative and Statistical Records | | | |
| | | | | |
| - | filing for bankruptcy under Chapters 7, 11, or 13? You have nothing to report on this part of the form. Check this box and submit this form to the court with | າ your o | ther schedules | S. |
| Yes | | | | |
| | nd of debt do you have? | | | |
| | Ir debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily sehold purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | for a pe | ersonal, family | , or |
| _ \ | and the same of materials and an arranged the Materials and the same of the sa | | | |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 9 of 49

Debtor 1 Jeannetta Marie Johnson

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,633.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schodula E/F compthe following: | Total | claim |
|--|-------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 6,576.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 6,576.00 |

| Fill in this info | rmation to identify your cas | e and this filing: | | | |
|---|--|--|---|----------------------|--|
| Debtor 1 | Jeannetta Marie Joh | nson | | | |
| | First Name | Middle Name Last Nam | e | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name Last Nam | | | |
| | | | e | | |
| United States B | Sankruptcy Court for the: SC | OUTHERN DISTRICT OF INDIANA | | | |
| Case number | | | | | Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Official Ea | orm 1061/P | | | | |
| _ | orm 106A/B | | | | |
| Schedu | le A/B: Propei | 'ty | | | 12/15 |
| hink it fits best. nformation. If mo Answer every que | Be as complete and accurate a ore space is needed, attach a se estion. | ms. List an asset only once. If an asset f s possible. If two married people are filin parate sheet to this form. On the top of a nd, or Other Real Estate You Own or Hav | g together, both are equally r ny additional pages, write yo | esponsible for supp | lying correct |
| . Do you own or | have any legal or equitable into | erest in any residence, building, land, or | similar property? | | |
| ■ No. Go to Pa | art 2 | | | | |
| _ | e is the property? | | | | |
| ☐ Yes. Where | e is the property? | | | | |
| | | | | | |
| Part 2: Describe | e Your Vehicles | | | | |
| □ No ■ Yes | | | | | |
| 3.1 Make: | Dodge | Who has an interest in the propert | | deduct secured claim | ns or exemptions. Put |
| Model: | Avenger | Debtor 1 only | | | Secured by Property. |
| Year: | 2008 | Debtor 2 only | Currer | nt value of the | Current value of the |
| | ate mileage: | _ Debtor 1 and Debtor 2 only | | property? | portion you own? |
| Other info | | \square At least one of the debtors and ar | other | | |
| | n: 11248 Whistler Dr., polis IN 46229 | Check if this is community pro (see instructions) | perty | \$4,500.00 | \$4,500.00 |
| Examples: Bo No Yes Solution Add the doll pages you have the pages | lar value of the portion you nave attached for Part 2. Wr | ite that number here | es, motorcycle accessories 2, including any entries f | Cu | \$4,500.00 Trent value of the rtion you own? |
| ☐ Yes 5 Add the dol | | | | | ıll of your entries from Part 2, including any entries for=> |
| Describe | e Your Personal and Househol | d Itams | | | |
| | | | s? | Cu | rrent value of the |
| _ : , : :: : : : : : : : : : : : : : : : | o,gai o. oquitable | g lici | | po Do | |

Official Form 106A/B Schedule A/B: Property page 1

| Debtor 1 | Jeannetta Marie Johnson | Case number | (if known) |
|-------------------------|---|--|--|
| | old goods and furnishings | | |
| <i>Exampl</i> □ No | es: Major appliances, furniture, linens, china, kitche | enware | |
| | Describe | | |
| — 165. | Describe | | |
| | washer & dryer Location: 11248 Whistler D | Dr., Indianapolis IN 46229 | \$1,100.00 |
| | | | <u> </u> |
| 7. Electron Example No | nics les: Televisions and radios; audio, video, stereo, an including cell phones, cameras, media players, | | s; music collections; electronic devices |
| ☐ Yes. | Describe | | |
| Exampl ■ No | bles of value es: Antiques and figurines; paintings, prints, or othe other collections, memorabilia, collectibles | er artwork; books, pictures, or other art objects; sta | amp, coin, or baseball card collections; |
| ⊔ Yes. | Describe | | |
| | ent for sports and hobbies es: Sports, photographic, exercise, and other hobby musical instruments | y equipment; bicycles, pool tables, golf clubs, skis | ; canoes and kayaks; carpentry tools; |
| | Describe | | |
| | | | |
| 10. Firearn Examp ■ No | ns <i>oles:</i> Pistols, rifles, shotguns, ammunition, and relat | ted equipment | |
| | Describe | | |
| □ No | s bles: Everyday clothes, furs, leather coats, designer Describe | r wear, shoes, accessories | |
| | clothing Location: 11248 Whistler D | Or., Indianapolis IN 46229 | \$100.00 |
| | | | |
| ■ No | y bles: Everyday jewelry, costume jewelry, engageme Describe | ent rings, wedding rings, heirloom jewelry, watches | s, gems, gold, silver |
| | rm animals oles: Dogs, cats, birds, horses | | |
| ■ No □ Yes. | Describe | | |
| | her personal and household items you did not a | already list, including any health aids you did n | not list |
| ■ No □ Yes. | Give specific information | | |
| | the dollar value of all of your entries from Part 3 art 3. Write that number here | | ched \$1,200.00 |
| Part 4: De | scribe Your Financial Assets | | |
| | vn or have any legal or equitable interest in any | of the following? | Current value of the |
| • | , | - | portion you own? Do not deduct secured |

claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Official Form 106A/B Schedule A/B: Property

37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Official Form 106A/B Schedule A/B: Property page 4 Best Case Bankruptcy

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 14 of 49

| Debt | or 1 Jeannetta Marie Johnson | | Case number (if known) | |
|------|--|----------------------------|---------------------------|-------------------------|
| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property If you own or have an interest in farmland, list it in Part 1. | You Own or Have an Interes | st In. | |
| | o you own or have any legal or equitable interest in any far | rm- or commercial fishin | g-related property? | |
| | ■ No. Go to Part 7. ☐ Yes. Go to line 47. | | | |
| Part | 7: Describe All Property You Own or Have an Interest in That | You Did Not List Above | | |
| | Po you have other property of any kind you did not already I Examples: Season tickets, country club membership No Yes. Give specific information | list? | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write | e that number here | | \$0.00 |
| Part | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$4,500.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,200.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$8,100.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$13,800.00 | Copy personal property to | otal \$13,800.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$13,800.00 |

Official Form 106A/B Schedule A/B: Property page 5

| Fill | l in this informa | ation to identify your o | ase: | | | | |
|------|---|---|---|----------|---|--------------------|----------------------------|
| De | ebtor 1 | Jeannetta Marie J | · · · · | | (No | | |
| DΔ | ebtor 2 | First Name | Middle Name | La | ast Name | | |
| | ouse if, filing) | First Name | Middle Name | La | ast Name | | |
| Un | ited States Banl | kruptcy Court for the: | SOUTHERN DISTRICT OF | INDIA | NA | | |
| _ | | | | | | | |
| | ase number | | | | | | Check if this is an |
| | | | | | | | amended filing |
| ~ (| · · · · · - | 4000 | | | | | |
| ال | fficial For | m 106C | | | | | |
| S | chedule | C: The Pro | perty You Cla | ıim | as Exempt | | 4/19 |
| 30 ' | as complete and | d accurate as possible | f two married people are filing | r toget | her, both are equally responsible for | or eupplying | correct information. Using |
| he | property you list | ted on <i>Schedule A/B: P</i> | roperty (Official Form 106A/B) | as yo | ur source, list the property that you | claim as ex | empt. If more space is |
| | eded, fill out and se number (if kno | | nany copies of Part 2: Addition | nal Pa | ge as necessary. On the top of any | additional p | ages, write your name and |
| | | | evenut vou must specify the | . o oma | ount of the exemption you claim. | One way of | doing so is to state a |
| | | | | | r market value of the property be | | |
| | | | | | h aids, rights to receive certain by tion of 100% of fair market values | | |
| xe | emption to a pa | rticular dollar amount | | | etermined to exceed that amoun | | |
| o t | he applicable s | statutory amount. | | | | | |
| Pa | rt 1: Identify | the Property You Clai | m as Exempt | | | | |
| 1. | Which set of e | exemptions are you cl | aiming? Check one only, ever | n if yo | ur spouse is filing with you. | | |
| | You are clai | ming state and federal | nonbankruptcy exemptions. | 11 U.S | s.C. § 522(b)(3) | | |
| | | - | s. 11 U.S.C. § 522(b)(2) | | | | |
| 2 | | | | omnt | fill in the information below. | | |
| ۷. | | | • | • • | | Cassific Is | we that allow averages |
| | | n of the property and line nat lists this property | on Current value of the portion you own | Amo | ount of the exemption you claim | Specific ia | ws that allow exemption |
| | | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| | clothing | | | | 4 | Ind Cod | e § 34-55-10-2(c)(2) |
| | _ | 248 Whistler Dr., | \$100.00 | | \$100.00 | ilia. ood | e 3 34-33-10-2(c)(2) |
| | Indianapolis | | | | 100% of fair market value, up to | | |
| | Line from Sche | edule A/B: 11.1 | | | any applicable statutory limit | | |
| | prepaid card | d: Chime | \$100.00 | | \$100.00 | Ind. Cod | e § 34-55-10-2(c)(3) |
| | Line from Sche | edule A/B: 17.1 | Ψ100.00 | _ | | | |
| | | | | | 100% of fair market value, up to any applicable statutory limit | | |
| | | | | | | | |
| | | through employer | \$8,000.00 | | \$8,000.00 | Ind. Cod | e § 34-55-10-2(c)(6) |
| | Line from Sche | edule A/B: 21.1 | | | 100% of fair market value, up to | | |
| | | | | | any applicable statutory limit | | |
| | | | | | | | |
| 3. | | | nption of more than \$170,35 | | ed on or after the date of adjustme | nt \ | |
| | ■ No | ustillerit on 4/01/22 and | every 5 years after that for ca | 1363 111 | ed on or after the date of adjustifie | iii.) | |
| | _ | you acquire the property | covered by the exemption wi | ithin 1 | 215 days before you filed this case | .? | |
| | □ No | | . 3370.04 by the exemption wi | | = . S days soloto you mou tills base | | |
| | ☐ Yes | | | | | | |

Official Form 106C

| =:::::::::::::::::::::::::::::::::::::: | | | | | |
|--|--------------------------|---|--------------------------|--|--------------------------|
| Fill in this informa | tion to identify you | r case: | | | |
| Debtor 1 | Jeannetta Marie | | | _ | |
| | First Name | Middle Name Last Name | l | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name Last Name | 1 | - | |
| United States Bank | ruptcy Court for the: | SOUTHERN DISTRICT OF INDIANA | | _ | |
| Case number | | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | ameno | led filing |
| Official Form | 106D | | | | |
| | | Who Have Claims Secur | od by Droport | · · · | 40/45 |
| Schedule L | o: Creditors | Who Have Claims Secur | ed by Propert | . y | 12/15 |
| | | f two married people are filing together, both are out, number the entries, and attach it to this form | | | |
| 1. Do any creditors ha | ave claims secured by | your property? | | | |
| □ No. Check the property of the property o | his box and submit th | nis form to the court with your other schedules | s. You have nothing else | to report on this form. | |
| ■ Yes. Fill in a | Ill of the information b | pelow. | | | |
| | Secured Claims | | | | |
| | | nore than one accurad claim, list the graditar concer | Column A | Column B | Column C |
| for each claim. If more | e than one creditor has | nore than one secured claim, list the creditor separa a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name. | | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Credit Acce | eptance | Describe the property that secures the claim: | \$6,000.00 | \$4,500.00 | \$1,500.00 |
| Creditor's Name | | 2008 Dodge Avenger | | | |
| | | Location: 11248 Whistler Dr., | | | |
| | | Indianapolis IN 46229 As of the date you file, the claim is: Check all that | | | |
| P.O. Box 50 | - | apply. | L | | |
| Southfield, | | Contingent | | | |
| Number, Street, C | ity, State & Zip Code | Unliquidated | | | |
| Who owes the debt | t? Check one | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | one on one | ☐ An agreement you made (such as mortgage or | r secured | | |
| Debtor 2 only | | car loan) | | | |
| Debtor 1 and Debt | tor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien | n) | | |
| ☐ At least one of the | • | ☐ Judgment lien from a lawsuit | , | | |
| ☐ Check if this clair | m relates to a | Other (including a right to offset) vehicle | | | |
| community debt | | | | | |
| Date debt was incurr | red <u>9-1-18</u> | Last 4 digits of account number | | | |
| 2.2 Progressive | e Leasing | Describe the property that secures the claim: | \$1,000.00 | \$1,100.00 | \$0.00 |
| Creditor's Name | | washer & dryer | | | |
| | | Location: 11248 Whistler Dr., Indianapolis IN 46229 | | | |
| 256 W. Data | a Drive | As of the date you file, the claim is: Check all that apply. | İ | | |
| Draper, UT | 84020 | ☐ Contingent | | | |
| Number, Street, C | ity, State & Zip Code | ☐ Unliquidated | | | |
| | | Disputed | | | |
| Who owes the debt | t? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | An agreement you made (such as mortgage or car loan) | r secured | | |
| Debtor 2 only | | _ | | | |
| Debtor 1 and Debt | • | Statutory lien (such as tax lien, mechanic's lier | 1) | | |
| ☐ At least one of the ☐ Check if this clair | | Judgment lien from a lawsuit Other (including a right to effect) furniture | Δ. | | |
| community debt | | Other (including a right to offset) | <u>-</u> | | |
| Date debt was incurr | red 12-1-19 | Last 4 digits of account number | | | |

Official Form 106D

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 17 of 49

| Debtor 1 | Jeannetta N | larie Johnson | | Case number (if known) |
|-----------|-------------------------------------|-------------------------------|-----------------------------------|------------------------|
| | First Name | Middle Name | Last Name | • |
| | | | | |
| | | | | |
| Add the | dollar value of y | our entries in Column A on tl | his page. Write that number here: | \$7,000.0 |
| | the last page of at number here: | your form, add the dollar val | ue totals from all pages. | \$7,000.0 |
| write tha | it number nere: | | | V 1,5555 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

| Fill in this info | rmation to identify your | case: | | | | |
|--|---|--|--|---|---|---|
| | | | | | | |
| Debtor 1 | Jeannetta Marie | Jonnson Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States B | ankruptcy Court for the: | SOUTHERN DISTRIC | T OF INDIANA | | | |
| Case number (if known) | | | | | | theck if this is an mended filing |
| Official For Schedule | m 106E/F E/F: Creditors W | /ho Have Unsec | ured Claims | | | 12/15 |
| any executory con Schedule G: Exec Schedule D: Cred left. Attach the Co name and case no | ntracts or unexpired leases cutory Contracts and Unexp itors Who Have Claims Sec ontinuation Page to this pag umber (if known). | that could result in a clair bired Leases (Official Form sured by Property. If more s ge. If you have no informat | n. Also list executory 106G). Do not include space is needed, copy | contracts on S any creditors the Part you n | litors with NONPRIORITY clai ichedule A/B: Property (Offici with partially secured claims eed, fill it out, number the en t Part. On the top of any addit | al Form 106A/B) and on that are listed in tries in the boxes on the |
| | All of Your PRIORITY Ur | | | | | |
| | tors have priority unsecure | ed claims against you? | | | | |
| No. Go to | Part 2. | | | | | |
| ☐ Yes. | | | | | | |
| Part 2: List | All of Your NONPRIORIT | TV Unsecured Claims | | | | |
| | tors have nonpriority unse | | | | | |
| _ ` | | | | | | |
| ☐ No. You h | ave nothing to report in this p | part. Submit this form to the o | ourt with your other sch | edules. | | |
| Yes. | | | | | | |
| unsecured cla | aim, list the creditor separatel | y for each claim. For each cl | aim listed, identify what | type of claim it | claim. If a creditor has more that is. Do not list claims already incity unsecured claims fill out the | luded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 Acima | Credit | Last 4 digi | ts of account number | 59 | | \$858.00 |
| Nonprior 9815 S | ity Creditor's Name 5. Monroe St. Fl 4 | | the debt incurred? | 7-1-18 | | |
| | , UT 84070 Street City State Zip Code | | ate you file, the claim | ia. Chaak all th | ot apply | |
| | surred the debt? Check one. | | ate you me, me claim | is. Check all th | ат аррту | |
| | or 1 only | | ant | | | |
| | | ☐ Conting | | | | |
| ☐ Debto | • | ☐ Unliquid | | | | |
| | or 1 and Debtor 2 only | ☐ Dispute | d DNPRIORITY unsecure | d alaimı | | |
| | ast one of the debtors and an | | | u Ciaiiii. | | |
| ∐ Chec debt | ck if this claim is for a com | munity | | rotion cares | ont or divorce that you did = -4 | |
| | aim subject to offset? | | ons arising out of a sepa riority claims | aration agreem | ent or divorce that you did not | |
| ■ No | | · · · | pension or profit-sharir | ng plans, and o | ther similar debts | |
| ☐ Yes | | | Specify loan | | | |
| — 165 | | Otner. S | specify | | | - |

Official Form 106 E/F

| Debtor | 1 Jeannetta Marie Johnson | | Case number (if known) | |
|--------|--|---|---|------------|
| 4.2 | AFNI | Last 4 digits of account number | 217 | \$523.00 |
| | Nonpriority Creditor's Name P.O. Box 3097 | When was the debt incurred? | 3-11-19 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sena | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | iration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify collection (| Comcast | |
| 4.3 | Brown Mackie College | Last 4 digits of account number | | \$3,000.00 |
| | Nonpriority Creditor's Name c/o Williams & Fudge 300 Chatham Ave. Rock Hill, SC 29730 | When was the debt incurred? | 2016 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharin | | |
| | ☐ Yes | Other. Specify school clos | | |
| 4.4 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 305 | \$599.00 |
| | N56 Ridgewood Dr. Menomonee Falls, WI 53051 | When was the debt incurred? | 11-26-16 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other Specify credit card | Kohls | |

| Debtor | 1 Jeannetta Marie Johnson | | Case number (if known) | |
|--------|---|--|--|-------------|
| 4.5 | CB Indigo | Last 4 digits of account number | 004 | \$348.00 |
| | Nonpriority Creditor's Name P.O. Box 4499 | When was the debt incurred? | 7-19-18 | |
| | Beaverton, OR 97076 | _ | | |
| | Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify credit card | | |
| 4.6 | Credit Collection | Last 4 digits of account number | 327 | \$122.36 |
| | Nonpriority Creditor's Name | _ | | |
| | Two Wells Ave. Newton Center, MA 02459 | When was the debt incurred? | 2-5-19 | |
| | Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify collection (| Geico | |
| 4.7 | Diversified Consultants | Last 4 digits of account number | 057 | \$1,529.00 |
| | Nonpriority Creditor's Name 10550 Deerwood Pk Blvd. #708 Jacksonville, FL 32256 | When was the debt incurred? | 11-1-17 | |
| | Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | • • | |
| | ☐ Yes | ■ Other. Specify collection S | Sprint | |

| Debto | r 1 <u>Jeannetta Marie Johnson</u> | Case number (if known) | |
|----------|--|---|---|
| 4.8 | Enhanched Recovery | Last 4 digits of account number 803 | \$451.00 |
| | Nonpriority Creditor's Name 8014 Bayberry Rd. Jacksonville, FL 32256 | When was the debt incurred? 4-15-19 | <u> </u> |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify collection TMobile | |
| 4.9 | ERC | Last 4 digits of account number 542 | \$451.08 |
| | Nonpriority Creditor's Name P.O. Box 23870 Jacksonville, FL 32241 | When was the debt incurred? 4-16-19 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify collection TMobile | |
| 4.1 | Fifth Third Bank | Last 4 digits of account number | \$200.00 |
| <u> </u> | Nonpriority Creditor's Name | | • |
| | 5050 Kingsley Dr. | When was the debt incurred? 2018 | |
| | Cincinnati, OH 45263 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | lacksquare Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify NSF | |

| tor 1 Jeannetta Marie Johnson Case number (if known) | | | |
|---|--------------------------------------|--|-------------------|
| GLA | Last 4 digits of account number | 186 | \$124.0 |
| Nonpriority Creditor's Name 2630 Gleeson | When was the debt incurred? | 6-20-18 | V.2 |
| Louisville, KY 40299 Number Street City State Zip Code | As of the date you file, the claim | in Charle all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim | s. Crieck all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | • | |
| Yes | Other. Specify collection I | Meridian Med Grp. | |
| Harris & Harris | Last 4 digits of account number | various | \$11,946.1 |
| Nonpriority Creditor's Name | _ | 4 00 40 0 04 40 40 40 | |
| | | 4-22-19, 6-24-19, 12-19-18, 3-23-18, 4-19-18, 12-20-18, | |
| 111 W. Jackson Blvd.#400 Chicago, IL 60604 | When was the debt incurred? | 1-17-19 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | Later | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | Student loans | | |
| Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify _collection I | U, IU Health, IU Radiology | |
| IU Health | | 139 | \$49,154.5 |
| Nonpriority Creditor's Name | Last 4 digits of account number | | \$49,134.3 |
| 250 N. Shadeland Indianapolis, IN 46219 | When was the debt incurred? | 4-18-19 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | ☐ Debts to pension or profit-sharing | | |
| Yes | Other. Specify medical bil | I | |

Official Form 106 E/F

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 23 of 49

| Debtor | 1 Jeannetta Marie Johnson | | Case number (if known) | |
|----------|---|--|--|------------|
| 4.1 | Kinum | Last 4 digits of account number | 586 | \$309.90 |
| | Nonpriority Creditor's Name 770 Lynnhaven Pkwy. #160 Virginia Beach, VA 23452 | When was the debt incurred? | 7-29-19 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify collection is | Podiatry Assoc. | |
| 4.1 5 | Mohela | Last 4 digits of account number | various | \$6,576.00 |
| | Nonpriority Creditor's Name | | 2 4 15 1 14 16 12 10 15 | |
| | 633 Spirit Chesterfield, MO 63005 | When was the debt incurred? | 3-4-15, 1-14-16, 12-10-15, 1-1-20 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | student loa | n | |
| 4.1 6 | RMP | Last 4 digits of account number | 925 | \$197.32 |
| | Nonpriority Creditor's Name 8-85 Knue Rd. Indianapolis, IN 46250 | When was the debt incurred? | 11-30-18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify collection | MSD of Warren Twp. | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Jeannetta Marie Johnson

Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 6,576.00 |
| claims from Part 2 | C ~ | Obligations arising sut of a consention agreement or diverse that | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 69,813.36 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 76,389.36 |

| Fill in this infor | | | | |
|---|-----------------|-------------------|------------|-----------|
| Debtor 1 | Jeannetta Marie | Johnson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | SOUTHERN DISTRICT | OF INDIANA | |
| Case number | | | | |
| (if known) | | | | ☐ Check i |
| | | | | amende |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have the street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | , | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | - | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |

Official Form 106G

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 26 of 49

| Fill in this | information to identify your | case: | | | |
|--|--|--|---|--|---|
| Debtor 1 | Jeannetta Marie | lohnson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| | es Bankruptcy Court for the: | SOUTHERN DISTRICT | OF INDIANA | | |
| Ormod Otal | oo Bariik aptoy Court for the. | | <u> </u> | | |
| Case numb (if known) | per | | | | ☐ Check if this is an amended filing |
| Sched Codebtors | | re also liable for any deb | | | 12/15 rate as possible. If two married needed, copy the Additional Page, |
| fill it out, an | | boxes on the left. Attach | the Additional Page t | | p of any Additional Pages, write |
| 1. Do y | ou have any codebtors? (If | you are filing a joint case, | do not list either spouse | as a codebtor. | |
| ■ No □ Yes | | | | | |
| Arizona No. 0 Yes. 3. In Coluin line Form 1 | a, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo umn 1, list all of your codeb 2 again as a codebtor only | , Nevada, New Mexico, Pu use, or legal equivalent live cors. Do not include your if that person is a guaran | e with you at the time? spouse as a codebtor tor or cosigner. Make | ington, and Wisconsin. if your spouse is filir sure you have listed t | ty states and territories include ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor lame, Number, Street, City, State and Z | IP Code | | Column 2: The cr Check all schedul | editor to whom you owe the debt |
| 3.1 | Name Number Street | | | Schedule D, lir | ne line |
| | Dity | State | ZIP Code | | |
| 3.2 | Name | | | _ ☐ Schedule D, lir☐ Schedule E/F,☐ Schedule G, lir☐ | line |
| | Number Street City | State | ZIP Code | _ | |

| | in this information to identify your obtor 1 Jeannetta M | case: Marie Johnson | | | | | | | |
|-------------|--|---|---|-------------|------|--------------------------------|------------------------------|------------------------------------|----------|
| | btor 2 | | | | | | | | |
| | ited States Bankruptcy Court for the | e: SOUTHERN DISTRIC | CT OF INDIANA | | | | | | |
| | se number nown) | | - | | | | ended filing lement showi | ng postpetition following date: | |
| 0 | fficial Form 106I | | | | | MM / D | D/ YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and yo ch a separate sheet to this form. The describe Employment information with a separate sheet to the separate sheet | ur spouse is not filing w On the top of any additi | ith you, do not inclu | ide infor | mati | on about your d case number | spouse. If m | ore space is | needed, |
| | information. | | | | | | | ning spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed□ Not employed | • | | | mployed ot employed | | |
| | employers. | Occupation | Supervisor | Supervisor | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Lowes | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 1605 Curtis Brid Wilkesboro, NC | | | | | | |
| | | How long employed t | here? <u>17 yea</u> ı | rs | | | | | |
| Pai | rt 2: Give Details About Mo | nthly Income | | | | | | | |
| | mate monthly income as of the ouse unless you are separated. | date you file this form. If | you have nothing to r | eport for | any | line, write \$0 in | the space. Ir | nclude your no | n-filing |
| | ou or your non-filing spouse have me e space, attach a separate sheet to | | ombine the informatio | n for all e | empl | oyers for that p | erson on the | lines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or ling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 5,633. | 03 \$ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | 0. | <u>00 </u> +\$ _ | N/A | |
| 4. | Calculate gross Income. Add l | ine 2 + line 3. | | 4. | \$ | 5,633.03 | \$ | N/A | |

| Debt | or 1 | Jeannetta Marie Johnson | - | (| Case number | (if known) | | | | |
|------|--------------------|--|----------|------------|-------------|------------|----------|------------------------|------------|-----------------|
| | | | | | For Debtor | | no | r Debtor n-filing s | | |
| | Cop | by line 4 here | 4. | | \$5, | 633.03 | _ \$_ | | N/A | _ |
| 5. | List | t all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ì. | \$ | 956.95 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b |). | \$ | 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c | | | 338.00 | | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ | 0.00 | | | N/A | _ |
| | 5e. | Insurance | 5e | | | 540.37 | | | N/A | _ |
| | 5f. | Domestic support obligations Union dues | 5f. | | \$ \$ | 0.00 | | | N/A | _ |
| | 5g. 5h. | Other deductions. Specify: | 5g 5h | j. 1.+ | \$ | 0.00 | - :- | | N/A N/A | _ |
| 6. | | d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | _ 6. | | · — | 835.32 | - '- | | N/A | _ |
| | | | 7. | | | | | | | _ |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | э | 797.71 | - Φ_ | | N/A | _ |
| 8. | List 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 8a | ۱. | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b |). | \$ | 0.00 | \$ | | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | : . | \$ | 146.00 | \$ | | N/A | |
| | 8d. | | 8d | | \$ | 0.00 | - ' - | | N/A | _ |
| | 8e. | Social Security | 8e | . | \$ | 0.00 | – | | N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$ | 0.00 | | | N/A | _ |
| | 8g. | Pension or retirement income | 8g | | \$ | 0.00 | | | N/A | _ |
| | 8h. | Other monthly income. Specify: | _ 8h | 1.+ | \$ | 0.00 | - + \$ - | | N/A | - |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | 9 | S | 146.00 | \$_ | | N// | 4 |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 3,943. | 71 + \$ | | N/A | = \$ | 3,943.71 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | _ | -,- | | | | . L | -,- |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depe | | , , | | , | | | 0.00 |
| 12. | | d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | e. 12. | \$ | 3,943.71 ned |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | ? | | | | | | | ly income |
| | П | Yes, Explain: | | | | | | | | |

Schedule I: Your Income

page 2

Official Form 106I

| Fill | in this informa | tion to identify yo | our case: | | | l | | |
|-----------|---------------------------|--|----------------|---|--|-------------|----------------------------------|---|
| | tor 1 | Jeannetta Ma | | nson | | Ch | eck if this is: An amended filin | a |
| | tor 2 ouse, if filing) | | | | | | A supplement sh | owing postpetition chapter of the following date: |
| Unit | ed States Bankr | uptcy Court for the | : SOUTH | IERN DISTRICT OF INDIA | NA | | MM / DD / YYYY | |
| 1 | e numbe r nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| So | chedule | J: Your I | Exper | ises | | | | 12/1 |
| info | ormation. If m | | eded, atta | If two married people ar ch another sheet to this n. | | | | |
| Par 1. | t 1: Descr | ibe Your House at case? | hold | | | | | |
| | ■ No. Go to | | n a senar | ate household? | | | | |
| | □N | 0 | • | al Form 106J-2, <i>Expenses</i> | for Separate House | ehold of De | ebtor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list Do Debtor 2. | • | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state dependents | | | | Daughter | | 11 | □ No ■ Yes |
| | | | | | Son | | 18 | □ No ■ Yes |
| | | | | | | | | □ No □ Yes □ No |
| | | | | | | | | _ Pes |
| 3. | expenses of | enses include f people other tl d your depende | han $_{f 	au}$ | No Yes | | | | |
| exp | imate your ex | | our bankr | uptcy filing date unless y | | | | hapter 13 case to report of the form and fill in the |
| the | | n assistance and | | government assistance i luded it on <i>Schedule I:</i> \ | | | Your ex | penses |
| 4. | | or home owners | | ses for your residence. I | nclude first mortgag | e 4. | \$ | 320.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | | rty, homeowner's | | | | 4b. | : | 0.00 |
| | | | | ipkeep expenses | | 4c. | · | 0.00 |
| 5 | | owner's associat | | dominium dues Dur residence, such as ho | me equity loans | 4d. 5 | \$ | 0.00 |

| Debtor 1 | Jeannetta Marie Johnson | Case num | ber (if known) | |
|---------------------------|---|-------------|----------------|--------------------------|
| 6. Utiliti | es: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 400.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 60.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 300.00 |
| 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| . Food | and housekeeping supplies | | \$ | 600.00 |
| | care and children's education costs | 8. | · | 200.00 |
| | ing, laundry, and dry cleaning | 9. | | 250.00 |
| | onal care products and services | 10. | · | 160.00 |
| | cal and dental expenses | 11. | · - | 125.00 |
| | sportation. Include gas, maintenance, bus or train fare. | | | 123.00 |
| | it include car payments. | 12. | \$ | 300.00 |
| | tainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 155.00 |
| | table contributions and religious donations | 14. | \$ | 0.00 |
| 5. Insur | _ | | | |
| | t include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. | Life insurance | 15a. | \$ | 40.00 |
| 15b. | Health insurance | 15b. | \$ | 0.00 |
| 15c. | Vehicle insurance | 15c. | \$ | 85.00 |
| 15d. | Other insurance. Specify: | 15d. | \$ | 0.00 |
| | Do not include taxes deducted from your pay or included in lines 4 or 20. | | · - | |
| Speci | | 16. | \$ | 0.00 |
| 7. Insta | Iment or lease payments: | _ | | |
| | Car payments for Vehicle 1 | 17a. | \$ | 332.00 |
| 17b. | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. | Other. Specify: Progressive Leasing | 17c. | \$ | 100.00 |
| | Other. Specify: Zebit | 17d. | \$ | 20.00 |
| | Amazon | | \$ | 25.00 |
| | Get Fit Program | | \$ | 29.95 |
| 2 Vour | payments of alimony, maintenance, and support that you did not report as | | Ψ | 23.33 |
| | cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| | payments you make to support others who do not live with you. | | \$ | 0.00 |
| Speci | | 19. | · | <u> </u> |
| | real property expenses not included in lines 4 or 5 of this form or on Sche | | our Income. | |
| | Mortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | 20b. | \$ | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. | * | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | · - | 0.00 |
| | Homeowner's association or condominium dues | 20a. | · | 0.00 |
| | | | +\$ | |
| | : Specify: meals during work hours | | | 125.00 |
| • | xpense | | +\$ | 150.00 |
| | ming expense | | +\$ | 75.00 |
| vehic | cle maintence | | +\$ | 50.00 |
| Calcu | late your monthly expenses | | | |
| | Add lines 4 through 21. | | \$ | 3,901.95 |
| | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | 3,301.33 |
| | | | · | |
| 22c. <i>F</i> | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,901.95 |
| . Calcu | late your monthly net income. | | | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,943.71 |
| | Copy your monthly expenses from line 22c above. | 23b. | · - | 3,901.95 |
| _55. | | 200. | | 0,001.00 |
| | Subtract your monthly expenses from your monthly income. | | | |
| 23c. | | 00- | \$ | 41.76 |
| 23c. | | 23c. | Ι Ψ | |
| 23c. | The result is your monthly net income. | 23C. | | |
| l. Do yo | The result is your <i>monthly net income</i> . ou expect an increase or decrease in your expenses within the year after yo | u file this | s form? | |
| . Do yo For ex | The result is your <i>monthly net income</i> . So expect an increase or decrease in your expenses within the year after your expenses of decrease in your expenses within the year of do you expect your part of your expect your car loan within the year or do you expect your | u file this | s form? | or decrease because of a |
| For ex | The result is your monthly net income. bu expect an increase or decrease in your expenses within the year after yo ample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage? | u file this | s form? | or decrease because of a |
| 1. Do yo For ex | The result is your monthly net income. Ou expect an increase or decrease in your expenses within the year after your expenses within the year after your expect your carloan within the year or do you expect your cation to the terms of your mortgage? | u file this | s form? | or decrease because of a |

| Fill in this information to identify your | case: | | | |
|---|-------------------------|-------------------------------|---|---|
| Debtor 1 Jeannetta Marie | | | | |
| First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | |
| (Spouse if, filing) First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | SOUTHERN DISTRIC | CT OF INDIANA | | |
| Case number | | | | |
| (if known) | | | _ | Check if this is an |
| | | | | amended filing |
| Official Form 106Dec | | | | |
| Declaration About a | n Individua | l Dehtor's Sch | nadulas | 40/45 |
| Deciaration About 8 | an marviaua | i Debioi 3 oci | iedules | 12/15 |
| obtaining money or property by fraud i years, or both. 18 U.S.C. §§ 152, 1341, 7 Sign Below | | nkruptcy case can result in | tines up to \$∠50,000, or impri | sonment for up to 20 |
| Did you pay or agree to pay some | one who is NOT an atte | orney to help you fill out ba | nkruptcy forms? | |
| ■ No | | | | |
| Yes. Name of person | | | Attach Bankruptcy Pet Declaration, and Signa | ition Preparer's Notice, ature (Official Form 119) |
| Under penalty of perjury, I declare that they are true and correct. | that I have read the su | mmary and schedules filed | with this declaration and | |
| X /s/ Jeannetta Marie Johnso | on | X | | |
| Jeannetta Marie Johnson Signature of Debtor 1 | | Signature of D | ebtor 2 | |
| Date March 2, 2020 | | Date | | |

| Fill | in this inform | nation to identify you | r case: | | | |
|-------|----------------------------|--|--|------------------------------------|--|------------------------------------|
| | otor 1 | Jeannetta Marie | | | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Bar | kruptcy Court for the: | SOUTHERN DISTRICT C | OF INDIANA | | |
| Cas | se number | | | | | |
| | nown) | | | | _ | Check if this is an mended filing |
| | | | | | | |
| | ficial For | | A (() () | | | |
| | | | Affairs for Individ | | | 4/19 |
| | | | | | equally responsible for sup additional pages, write you | |
| nun | nber (if known |). Answer every que | stion. | | | |
| Pai | rt 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | |
| 1. | What is your | current marital statu | ıs? | | | |
| | ☐ Married | | | | | |
| | ■ Not mari | ried | | | | |
| 2. | During the la | ıst 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No | | | | | |
| | _ | all of the places you l | ived in the last 3 years. Do no | ot include where you live now | '. | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. | Within the la | st 8 years, did you e | ver live with a spouse or leg | jal equivalent in a commun | ity property state or territory | y? (Community property |
| state | es and territorie | es include Arizona, Ca | lifornia, Idaho, Louisiana, Ne | vada, New Mexico, Puerto Ri | co, Texas, Washington and W | /isconsin.) |
| | ■ No | | | | | |
| | ☐ Yes. Ma | ke sure you fill out <i>Scl</i> | hedule H: Your Codebtors (Of | ficial Form 106H). | | |
| Par | t 2 Explain | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income | Gross income | Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | • | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$7,799.58 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 33 of 49

| ре | otor 1 <u>Je</u> | annetta M | arie Jonns | on | Cas | e number (if known) | | |
|----|----------------------------|-------------------------|--|--|---|--|---|---|
| | | | | | | | | |
| | | | | Debtor 1 | | Debtor 2 | | |
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | r last calen nuary 1 to | dar year: December | 31, 2019) | ■ Wages, commissions, bonuses, tips | \$48,730.00 | ☐ Wages, commissions, bonuses, tips | | |
| | | | | ☐ Operating a business | | ☐ Operating a | business | |
| | | dar year be December | | ■ Wages, commissions, bonuses, tips | \$39,580.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | ☐ Operating a business | | ☐ Operating a | business | |
| | List each | , | the gross inco | e and you have income that yome from each source separate | , | , | | |
| | □ 1es. | riii iii tile de | talis. | | | | | |
| | | | | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Pa | rt 3: List | : Certain Pa | yments You | Made Before You Filed for | Bankruptcy | | | |
| 6. | □ No. | During the No. Yes | ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below e paid that cr not include to adjustmen or Debtor 2 c | r both have primarily consumers of the both specific to the distribution of the bankruptcy and the both specific to the bankruptcy and the both specific to the bankruptcy and the bankruptcy are both have primarily consumers you filed for bankruptcy, distribution of the bankruptcy and the bankruptcy are specific to the bankruptcy and the bankruptcy are specification of the bankruptcy are specification of the bankruptcy are specification of the bankruptcy and the bankruptcy are specification of the bankruptcy are specification of the bankruptcy are specification of the bankruptcy and the bankruptcy are specification of the bankruptcy and the bankruptcy are specification of the bankruptcy and the bankruptcy are specification of the bankruptcy are specification of t | Imer debts. Consumer debts d purpose." d you pay any creditor a tota d a total of \$6,825* or more ints for domestic support obligations bankruptcy case. It is after that for cases filed on timer debts. | of \$6,825* or monor of some or more pay ations, such as che or after the date o | re? ments and t ild support a f adjustment | he total amount you and alimony. Also, do |
| | | ■ No. | Go to line 7 | | | | | |
| | | □ Yes | List below e | each creditor to whom you pai ments for domestic support of this bankruptcy case. | | | | |
| | Creditor' | s Name and | d Address | Dates of payme | nt Total amount paid | Amount you still owe | Was this | payment for |
| | | | | | puid | CLIII ON G | | |

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 34 of 49

Case number (if known)

| 7. | Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony. | rtners; relatives of any gen control, or owner of 20% o | eral partners; partner more of their voting | erships of which y g securities; and a | ou are a genera | al partner; corporations agent, including one for | |
|-----|--|--|---|---|----------------------------|--|--|
| | ■ No □ Yes. List all payments to an insider. | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | |
| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No Yes. List all payments to an insider | | ments or transfer a | ny property on | account of a d | ebt that benefited an | |
| | Insider's Name and Address | Dates of payment | Total amount | Amount you | ou Reason for this payment | | |
| | | | paid | still owe | Include cred | litor's name | |
| Par | t 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details. | cases, small claims action | s, divorces, collection | | actions, suppor | t or custody | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case | |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. | <i>i.</i> | erty repossessed, fo | | | | |
| | Creditor Name and Address | Describe the Property | _ | Date | • | Value of the property | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details. | | | nancial institutio | n, set off any a | amounts from your | |
| | Creditor Name and Address | Describe the action the | creditor took | Date take | e action was en | Amount | |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an ■ No □ Yes | | erty in the possessi | ion of an assign | ee for the bene | efit of creditors, a | |
| Par | t 5: List Certain Gifts and Contributions | | | | | | |
| 13. | ■ No □ Yes. Fill in the details for each gift. | | s with a total value | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | es you gave gifts | Value | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | |
| | | | | | | | |

Debtor 1 **Jeannetta Marie Johnson**

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 35 of 49

Case number (if known)

| 14. | Within 2 years before you filed for bankrupt | tcy, d | id you give any gifts or contributior | ns with a total | value of more than | \$600 to any charity? | | | |
|-----|--|-----------------|---|----------------------|--|--------------------------|--|--|--|
| | No☐ Yes. Fill in the details for each gift or cont | tributio | nn | | | | | | |
| | Gifts or contributions to charities that total more than \$600 | | Describe what you contributed | | Dates you contributed | Value | | | |
| | Charity's Name Address (Number, Street, City, State and ZIP Code) | | | | | | | | |
| Par | t 6: List Certain Losses | | | | | | | | |
| | | | | | | | | | |
| 15. | Within 1 year before you filed for bankruptc or gambling? | cy or s | since you filed for bankruptcy, did y | ou lose anyth | ning because of thef | t, fire, other disaster, | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | how the loss occurred Inc | clude | be any insurance coverage for the lot the amount that insurance has paid. Lot ce claims on line 33 of Schedule A/B: | ist pending | Date of your loss | Value of property lost | | | |
| Day | | | | | | | | | |
| Fal | t 7: List Certain Payments or Transfers | | | | | | | | |
| 16. | Within 1 year before you filed for bankruptc consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition prep | parin | g a bankruptcy petition? | | | rty to anyone you | | | |
| | □ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid | | Description and value of any prop | erty | Date payment | Amount of | | | |
| | Address Email or website address Person Who Made the Payment, if Not You | | transferred | or transfer was made | payment | | | | |
| | Batesky Law Office | | Attorney Fees | 2-18-20 | \$500.00 | | | | |
| | 22 E. Washington St. #210 | | • | | | • | | | |
| | Indianapolis, IN 46204 ssharondove@aol.com | | | | | | | | |
| | | | | | | | | | |
| 17. | Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you | ors or | to make payments to your creditor | | r transfer any prope | rty to anyone who | | | |
| | _ | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount of payment | | | |
| 4.0 | | | | | | | | | |
| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread | ousine ade a | ess or financial affairs? s security (such as the granting of a s | | | | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Received Transfer Address | | | | ny property or received or debts hange | Date transfer was made | | | |
| | Person's relationship to you | | | | | | | | |
| | | | | | | | | | |

Debtor 1 **Jeannetta Marie Johnson**

Debtor 1 Jeannetta Marie Johnson

Case number (if known)

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | |
|-----|--|---|--|-----------------------|--|---|
| | Name of trust | Description and v | escription and value of the property transferred | | | |
| Pai | t 8: List of Certain Financial Accounts, Instru | ıments, Safe Deposit | Boxes, and S | torage Unit | s | made |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | ast 4 digits of ecount number | Type of acco instrument | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | Do you still have it? |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | Do you still have it? |
| Pa | t 9: Identify Property You Hold or Control for | Someone Else | | | | |
| | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | | Describe the property | | Value |
| Pa | tt 10: Give Details About Environmental Inform | nation | | | | |
| For | the purpose of Part 10, the following definitions | s apply: | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardo toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | |
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Jeannetta Marie Johnson

Case number (if known)

| 24. | Has | las any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | |
|-----|---|--|--|---------------|--|--------------------|--|--|--|
| | | ■ No □ Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | nmental law, if you t | Date of notice | | | |
| 25. | Have | e you notified any governmental unit of | any release of hazardous material? | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | nmental law, if you t | Date of notice | | | |
| 26. | Hav | e you been a party in any judicial or adn | ninistrative proceeding under any envi | onmental l | aw? Include settlements | and orders. | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of t | he case | Status of the case | | | |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | | |
| 27. | With | nin 4 years before you filed for bankrupt | cy, did you own a business or have an | y of the foll | owing connections to an | y business? | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | | ☐ A partner in a partnership | | | | | | | |
| | | ☐ An officer, director, or managing executive of a corporation | | | | | | | |
| | | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | |
| | ■ No. None of the above applies. Go to Part 12. | | | | | | | | |
| | Yes. Check all that apply above and fill in the details below for each business. | | | | | | | | |
| | | | Describe the nature of the business | | Employer Identification number Do not include Social Security number or ITIN | | | | |
| | | dress nber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | business existed | number or ITIN. | | | |
| 28. | | nin 2 years before you filed for bankrupt itutions, creditors, or other parties. | cy, did you give a financial statement t | o anyone al | bout your business? Incl | ude all financial | | | |
| | | No | | | | | | | |
| | | Yes. Fill in the details below. | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | | | | | | | | |
| | | | | | | | | | |

Case 20-01170-JJG-7 Doc 1 Filed 03/02/20 EOD 03/02/20 10:15:00 Pg 38 of 49

| Debtor 1 Jeannetta Marie Johnson | | Case number (if known) |
|---|--|--|
| Part 12: Sign Below | | |
| I have read the answers on this Statement | king a false statement, concealing p | nents, and I declare under penalty of perjury that the answers roperty, or obtaining money or property by fraud in connection up to 20 years, or both. |
| /s/ Jeannetta Marie Johnson | | |
| Jeannetta Marie Johnson Signature of Debtor 1 | Signature of Debtor | 2 |
| Date March 2, 2020 | Date | |
| Did you attach additional pages to Your S ■ No □ Yes | tatement of Financial Affairs for Indi | ividuals Filing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pay someone who ■ No | is not an attorney to help you fill ou | ıt bankruptcy forms? |
| ☐ Yes. Name of Person . Attach the B | Bankruptcy Petition Preparer's Notice, | Declaration, and Signature (Official Form 119). |

| Fill in this inforn | nation to identify yo | ur case: | | |
|---------------------------------|---|-------------------------|---|---|
| Debtor 1 | Jeannetta Mari | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the | : SOUTHERN DIS | TRICT OF INDIANA | |
| Casa numbar | | | | |
| Case number(if known) | | | | ☐ Check if this is an amended filing |
| Official Fo Statemer | | on for Indiv | viduals Filing Under Chapt | er 7 12/15 |
| | ividual filing under c e claims secured by | hapter 7, you must fil | ll out this form if: | |
| _ | - | | at assistant | |
| You must file this | s form with the cour | | ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to t | |
| | eople are filing toget nd date the form. | her in a joint case, bo | oth are equally responsible for supplying correct | information. Both debtors must |
| | and accurate as pos our name and case r | | s needed, attach a separate sheet to this form. Or | n the top of any additional pages, |
| Part 1: List Yo | our Creditors Who H | ave Secured Claims | | |
| 1. For any credite | • | Part 1 of Schedule D | c Creditors Who Have Claims Secured by Proper | ty (Official Form 106D), fill in the |
| | editor and the propert | y that is collateral | What do you intend to do with the property the secures a debt? | Did you claim the property as exempt on Schedule C? |
| | | | | |
| Creditor's C | redit Acceptance | | ■ Surrender the property. | ■ No |
| name: | | | Retain the property and redeem it. | — 140 |
| Description of | 2008 Dodge Ave | enger | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property securing debt: | Location: 11248 | Whistler Dr., | Retain the property and [explain]: | _ |
| Creditor's P | rogressive Leasin | g | ☐ Surrender the property. | □ No |

Part 2: List Your Unexpired Personal Property Leases

Indianapolis IN 46229

Location: 11248 Whistler Dr.,

washer & dryer

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and redeem it.

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Yes

Official Form 108

name:

property

Description of

securing debt:

| Debto | or 1 Jeannetta Marie Johnson | Case number (if known) |
|--------|--|--|
| | article and a second | <u>_</u> |
| | or's name: ription of leased | □ No |
| Prope | | ☐ Yes |
| | or's name: | □ No |
| Prope | ription of leased erty: | ☐ Yes |
| | or's name: | □ No |
| Prope | ription of leased erty: | ☐ Yes |
| | or's name: | □ No |
| Prope | ription of leased erty: | ☐ Yes |
| | or's name: | □ No |
| Prope | ription of leased erty: | ☐ Yes |
| | or's name: ription of leased | □ No |
| Prope | | ☐ Yes |
| | or's name: | □ No |
| Prope | ription of leased erty: | ☐ Yes |
| Part 3 | 3: Sign Below | |
| Under | penalty of perjury, I declare that I have indicated my intention abo | out any property of my estate that secures a debt and any personal |
| proper | rty that is subject to an unexpired lease. | |
| | /s/ Jeannetta Marie Johnson | |
| - | Jeannetta Marie Johnson Signature of Debtor 1 | Signature of Debtor 2 |
| | Date March 2, 2020 | Date |
| | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Indiana

| In re | Jeannetta Marie Johnson | | Case No | | |
|-------|---|---|--|-----------------------|-----------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPE | ENSATION OF ATTOR | RNEY FOR D | EBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy, | or agreed to be pai | d to me, for services | |
| | For legal services, I have agreed to accept | | \$ | 1,000.00 | |
| | Prior to the filing of this statement I have received | 1 | \$ | 500.00 | |
| | Balance Due | | \$ | 500.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed com | npensation with any other person | unless they are men | mbers and associates | of my law firm. |
| | ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the n | | | | law firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspect | s of the bankruptcy | case, including: | |
| | Analysis of the debtor's financial situation, and render. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credit. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications. | atement of affairs and plan which itors and confirmation hearing, ar reduce to market value; exe | may be required; and any adjourned he emption planning | earings thereof; | l filing of |
| | 522(f)(2)(A) for avoidance of liens on h | | and ming of mo | tions pursuant to | 11 030 |
| 5. | By agreement with the debtor(s), the above-disclosed femous Representation of the debtors in any dany other adversary proceeding. | | | ces, relief from st | ay actions or |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of a ankruptcy proceeding. | ny agreement or arrangement for | payment to me for | representation of the | debtor(s) in |
| | arch 2, 2020 ate | Is/ Richard P. Bates Richard P. Bates Signature of Attorne Batesky Law Offi 22 E. Washington Indianapolis, IN 4 317-638-3471 Fasharondove@ac Name of law firm | ky, Ĵr. y ce i St. #210 6204 x: 317-638-2524 | | |

United States Bankruptcy Court Southern District of Indiana

| | | Southern District of Indiana | | |
|--------------|----------------------------|---|----------------|-----------------------|
| In re Jeann | etta Marie Johnson | | Case No. | |
| | | Debtor(s) | Chapter | 7 |
| | | | | |
| | VERI | IFICATION OF CREDITOR MA | ATRIX | |
| ne above-nam | ned Debtor hereby verifies | that the attached list of creditors is true and corre | ct to the best | of his/her knowledge. |
| Date: March | 2, 2020 | /s/ Jeannetta Marie Johnson | | |
| | | Jeannetta Marie Johnson | | |

Signature of Debtor

ACIMA CREDIT 9815 S. MONROE ST. FL 4 SANDY, UT 84070

AFNI P.O. BOX 3097 BLOOMINGTON, IL 61702

BROWN MACKIE COLLEGE C/O WILLIAMS & FUDGE 300 CHATHAM AVE. ROCK HILL, SC 29730

CAPITAL ONE N56 RIDGEWOOD DR. MENOMONEE FALLS, WI 53051

CB INDIGO P.O. BOX 4499 BEAVERTON, OR 97076

CREDIT ACCEPTANCE P.O. BOX 5070 SOUTHFIELD, MI 48086

CREDIT COLLECTION
TWO WELLS AVE.
NEWTON CENTER, MA 02459

DIVERSIFIED CONSULTANTS 10550 DEERWOOD PK BLVD. #708 JACKSONVILLE, FL 32256

ENHANCHED RECOVERY 8014 BAYBERRY RD. JACKSONVILLE, FL 32256

ERC
P.O. BOX 23870
JACKSONVILLE, FL 32241

FIFTH THIRD BANK 5050 KINGSLEY DR. CINCINNATI, OH 45263

GLA 2630 GLEESON LOUISVILLE, KY 40299

HARRIS & HARRIS 111 W. JACKSON BLVD.#400 CHICAGO, IL 60604

IU HEALTH
250 N. SHADELAND
INDIANAPOLIS, IN 46219

KINUM 770 LYNNHAVEN PKWY. #160 VIRGINIA BEACH, VA 23452

MOHELA 633 SPIRIT CHESTERFIELD, MO 63005

PROGRESSIVE LEASING 256 W. DATA DRIVE DRAPER, UT 84020

RMP 8-85 KNUE RD. INDIANAPOLIS, IN 46250